



Monte Vista Presbyterian Church

Vacation Bible School 2019

July 8th-12th, 2019 - 9 am to 12 noon



Welcome to Beach Bash VBS 2019! This year, your child will have an unforgettable beach blast vacation while getting Big Answers to Big Questions about Jesus. Camp will run from 9 am – 12 noon Monday through Friday, with a special closing event Friday evening.

We welcome all children (4 years old by July 8 and potty trained) through 5th grade - Nursery childcare will be provided for younger children of full-time (5 days) volunteers only.

How to Register:

1. Fill out the paper form and turn in to Julie DiMartino on Sundays or drop off in the Monte Vista Office during the week. Paperwork must be completed by June 24th.

Cost:

- \$50 per child/maximum of \$125 per family
- \$30 for children of adult volunteers working at least 3 days
- Free for children of adult volunteers working all 5 days

Payment Options:

- Payment by cash or check with the completed form to the church office during the week or to Julie DiMartino, on Sundays during service.

For liability reasons, this discount only applies to volunteers over the age of 18 (parents, grandparents, etc.) as we need to ensure an appropriate number of adults on campus for every minor (including minor volunteers). Volunteers must apply by June 3rd and all adults must consent to a background check. All volunteers will be required to attend a decorating and training session on Sunday, July 7th. Group leaders and assistants will also need to attend an additional training session in June.

Registration closes June 24th -Supplies are purchases based on the number of registered children at that time. Late registration may be allowed, although the child cannot be guaranteed a t-shirt. Unfortunately, we cannot issue refunds for cancellations received after June 24th.

If you have any questions or for more information or to apply as a volunteer, please contact:

Julie DiMartino, Children's Ministry Director 720-272-7073 (cell)
Julie.dimartino@montevistanp.church

We look forward to seeing you this summer!



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VBS FAQ

Who can attend? Monte Vista VBS is for all potty trained 4-year-olds through incoming 5th graders.

What about kids that just graduated 5th grade? We do have some spots available for middle schoolers to be a VBS volunteer. Contact Julie DiMartino for youth volunteer information. We also have several camps for incoming 6th graders this summer through our Youth Ministry, contact Matt Elam, at Matt.Elam@montevistanp.church for more information on our super fun Forest Home Camp and our Surf Camp.

Who can volunteer? Anyone, parents, grandparents, aunts, and uncles, just about anyone. We welcome all potential volunteers over the age of 18 to complete a volunteer application, which includes a background check and a follow-up interview and drop it off in the office during the week or to Julie DiMartino during Sunday Services. Our volunteers have so much fun, and there are lots of ways to volunteer, such as at snacks, crafts, games, check-in/out stations, and our beloved behind the scene volunteers who make it all happen.

What are the pickup and drop off procedures? Check-in begins at 8:50 am and check-out is at 12 noon. When you arrive, you will check your child in at the check-in station in front of the sanctuary. Then you will bring your child to the team leader or their helper, designated by color. To check out your child, stop by the check-out station in front of the sanctuary to sign them out, then proceed into the sanctuary to pick them up. Please make sure anyone who is picking up your child is listed on the authorization form.

What if my child has allergies or special needs? We welcome and will do our best to accommodate your child. The registration form has a section to indicate any allergies or any medical or special needs that your child may have. You are welcome to review our snacks for any potential allergens. If you have additional information that you would like to share, please contact Julie DiMartino. We want your child to have a fabulous summer vacation!

We look forward to seeing you this summer!



Monte Vista Presbyterian Church
Vacation Bible School 2019
Information and Payment Form



Please provide the following information:

Parent(s)/Guardian(s) Name: _____

Cell phone: _____

Email: _____

Mailing Address: _____

___ **Yes**, I am interested in helping as a volunteer. Please contact me about volunteering.

Parent(s)/Guardian(s) Name: _____

Cell phone: _____

Email: _____

Mailing Address: _____

___ **Yes**, I am interested in helping as a volunteer. Please contact me about volunteering.

Emergency Contact Information

Name: _____

Cell Phone: _____

Relationship to Child: _____

Additional adults authorized to pick up your child:

Name: _____

Cell Phone: _____

Name: _____

Cell Phone: _____

Payment:

\$50 per child/\$125 family maximum or \$30 for children of volunteers working at least 3 days.

Free for children of adult volunteers working 5 days.

Payments must be received with this registration form.

____ Total number of children attending

- \$50 per child/\$125 (Immediate family maximum)
- \$30 per child of adult volunteers working at least 3 days
- \$0 per child of adult volunteers for all 5 days

____ I would like information on financial assistance.

____ I would like to donate \$____ to the scholarship fund for kids who cannot afford VBS.

Payment Amount Enclosed: \$ ____ **Check #** ____ **Cash** ____

Please make checks payable to Monte Vista Presbyterian Church. Make sure to include the Child's Name on the memo line.



Monte Vista Presbyterian Church

Vacation Bible School 2019

Authorization Form



Name(s) of Minor(s): _____

____ (Initial) CONSENT AND DISCHARGE OF LIABILITY I, the undersigned parent/legal guardian of the minors listed above, hereby give permission for the minor(s) to participate in Vacation Bible School on July 8-12, 2019 ("Program"), at Monte Vista Presbyterian Church of Newbury Park, CA. In consideration of the Minor(s) being allowed to participate in the Program: I understand that the church and all its volunteers will exercise their judgment in supervising the Minor(s) and other participants in all sponsored activities and have a right to expect conduct of activities to be accomplished in a safe and careful manner. In spite of this care, it is always possible for the Minor(s) to be injured or become ill during the activities. In consideration of sponsoring, organizing, and supervising the activities during this time period as well as providing other services before, during, and after the activities, I agree to defend and hold harmless the Church and any of its agents, employees, or volunteers (collectively, "the Monte Vista Presbyterian Church Parties") from and against any and all losses, damages, liabilities, or expenses that arise out of or result from the student(s) participating in the Program.

____ (Initial) AUTHORIZATION FOR MEDICAL TREATMENT As the parent or legal guardian of the Minors identified above, the undersigned gives her or her authorization and consent for Monte Vista Presbyterian Church of Newbury Park, CA (the "Church") and the Church's adult employees, agents, and volunteers ("Parties") to seek, authorize, and consent to such medical or dental care for Minor(s) ("Treatment") as any one or more of them may deem necessary or appropriate. Such Treatment (1) shall be provided upon the advice of and supervision by a physician, surgeon, dentist, or other medical practitioner licensed to practice under the laws of the state or jurisdiction in which such Treatment is sought, and (2) may include, without limitation, X-ray examination; anesthetic; medical, dental, or surgical diagnosis or treatment; and hospital care. Every effort will be made to contact one of the signers of this authorization before treatment is authorized whenever possible. This Authorization for Medical Treatment may be photocopied hereof and shall be valid as an original copy. The undersigned acknowledges and agrees that Monte Vista Presbyterian Church parties shall not be legally or financially liable for any bill or expense incurred in, or any cause of action or claim arising from, the provision of any Treatment or the failure to provide or seek Treatment. In consideration of Minor(s)'s participation in this event sponsored by the Church, the undersigned hereby agrees to indemnify, defend, and hold harmless the Monte Vista Presbyterian Church Parties from and against any and all losses, damages, liabilities, or expenses (including, without limitation, reasonable attorneys' fees and other costs of defense) in connection with any and all actions, suits, claims, or demands that may be brought or instituted against any Monte Vista Presbyterian Church Party and arise out of or result from the provision or any Treatment or the failure to provide or seek any Treatment.

____ (Initial) PHOTOGRAPH RELEASE As the parent or legal guardian of the Minor, the undersigned gives permission and consent for Monte Vista Presbyterian Church of Newbury Park, CA (the "Church") to use photographs of Minor(s) in these and other such media: -Slideshows at Church -Church newsletters (printed copies distributed at Church and also emailed to the Church email distribution list) -Church website -Church Facebook page (Minor(s) will not be named or tagged in photographs) It is the Church's policy to generally use photographs of groups of children. Should the Church wish to use a photograph showing individual children, the Church will contact the parent or legal guardian for permission to use the photo.

Name (please print): _____ Signature: _____ Date: _____



Monte Vista Presbyterian Church
 Vacation Bible School 2019
 Child Registration Form



Please provide the following information for each child:

Name: _____

Age: ____ Birthdate: _____ Gender : ____

Grade entering in September 2019: _____

School: _____

Medical Information (Allergies/Special Needs): _____

If possible, place my child with _____

Please Circle T-Shirt Size: S(6-8) M(10-12) L(14-16) Adult S Adult M Adult L Adult XL

Name: _____

Age: ____ Birthdate: _____ Gender : ____

Grade entering in September 2019: _____

School: _____

Medical Information (Allergies/Special Needs): _____

If possible, place my child with _____

Please Circle T-Shirt Size: S(6-8) M(10-12) L(14-16) Adult S Adult M Adult L Adult XL

Name: _____

Age: ____ Birthdate: _____ Gender : ____

Grade entering in September 2019: _____

School: _____

Medical Information (Allergies/Special Needs): _____

If possible, place my child with _____

Please Circle T-Shirt Size: S(6-8) M(10-12) L(14-16) Adult S Adult M Adult L Adult XL

Name: _____

Age: ____ Birthdate: _____ Gender : ____

Grade entering in September 2019: _____

School: _____

Medical Information (Allergies/Special Needs): _____

If possible, place my child with _____

Please Circle T-Shirt Size: S(6-8) M(10-12) L(14-16) Adult S Adult M Adult L Adult XL

For additional children, please use another application form.